

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 16 OF 43

<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Elect April Freeman**

<b>A.</b> Full Name (Last, First, Middle Initial) <b>April Freeman</b>		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>05</td> <td></td> <td>13</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	05		13		2015
M M	/	D D	/	Y Y Y Y									
05		13		2015									
Mailing Address 2124 NE 15th Ter		<b>Transaction ID : SA11D.4691</b>											
City Cape Coral	State FL	Zip Code 33909	Amount of Each Receipt this Period <table border="1"> <tr> <td>5400.00</td> </tr> </table>	5400.00									
5400.00													
FEC ID number of contributing federal political committee. <b>C</b> H4FL19058		In-kind - copyrights											
Name of Employer Spiked Heel Film Productions	Occupation Film & Television Producer												
Receipt For: 2016 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <table border="1"> <tr> <td>5400.00</td> </tr> </table>			5400.00									
5400.00													
<b>B.</b> Full Name (Last, First, Middle Initial)		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y					
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Name of Employer	Occupation												
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<b>C.</b> Full Name (Last, First, Middle Initial)		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>		M M	/	D D	/	Y Y Y Y					
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<b>SUBTOTAL</b> of Receipts This Page (optional).....		<table border="1"> <tr> <td>5400.00</td> </tr> </table>		5400.00									
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<b>TOTAL</b> This Period (last page this line number only).....		<table border="1"> <tr> <td>5400.00</td> </tr> </table>		5400.00									
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